

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NEW REPUBLICAN.ORG

ADDRESS (number and street) ▼

815 SLATERS LANE

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00544544

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Gentry Collins

Signature of Treasurer

Gentry Collins

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NEW REPUBLICAN.ORG

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 05 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 05 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		1389.45
(b) Cash on Hand at Beginning of Reporting Period.....	156388.83	
(c) Total Receipts (from Line 19) .....	15000.00	335000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	171388.83	336389.45
7. Total Disbursements (from Line 31) .....	76194.78	241195.40
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	95194.05	95194.05
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	22500.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NEW REPUBLICAN.ORG

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	01	/	2015

To:

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2015

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

15000.00

315000.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

15000.00

315000.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

15000.00

315000.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

20000.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

15000.00

335000.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ..... ▶

15000.00

335000.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	76194.78	241195.40
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	76194.78	241195.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	76194.78	241195.40

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	15000.00	315000.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	15000.00	315000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	0.00	0.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 18  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**NEW REPUBLICAN.ORG**

<p>Full Name (Last, First, Middle Initial)  <b>A. Barry S Friedberg</b></p> <p>Mailing Address 134 E 71st Street</p> <p>City State Zip Code  New York NY 10021</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation  Friedberg Milstein LLC Finance</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">15000.00</span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  05 / 08 / 2015</p> <p><b>Transaction ID : SA11AI.4531</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">15000.00</span></p> <p>Political Donation</p>		
<p>Full Name (Last, First, Middle Initial)  <b>B.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p>		
<p>Full Name (Last, First, Middle Initial)  <b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation</p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;"></span></p>			<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;"></span></p>		
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p> <p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p><span style="border: 1px solid black; padding: 2px;">15000.00</span></p> <p><span style="border: 1px solid black; padding: 2px;">15000.00</span></p>		

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEW REPUBLICAN.ORG**

Full Name (Last, First, Middle Initial)

**A. Bluebonnet Fundraising**

Mailing Address 3300 Bee Caves Road # 650-1151

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

Purpose of Disbursement  
Consulting - Fundraising

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4542**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**B. Bluebonnet Fundraising**

Mailing Address 3300 Bee Caves Road # 650-1151

City Austin	State TX	Zip Code 78746
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Purpose of Disbursement  
Consulting - Fundraising April 2015

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4543**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. Bluebonnet Fundraising**

Mailing Address 3300 Bee Caves Road # 650-1151

City Austin	State TX	Zip Code 78746
----------------	-------------	-------------------

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4544**

Amount of Each Disbursement this Period

7024.70
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7024.70
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEW REPUBLICAN.ORG**

Full Name (Last, First, Middle Initial)

**A. Global Printing**

Mailing Address 3670 Wheeler Ave

City  
AlexandriaState  
VAZip Code  
22304Purpose of Disbursement  
New Republican Book - Advertising

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

**Transaction ID : SB29.4560**

Amount of Each Disbursement this Period

1433.12
---------

Full Name (Last, First, Middle Initial)

**B. Global Printing**

Mailing Address 3670 Wheeler Ave

City  
AlexandriaState  
VAZip Code  
22304Purpose of Disbursement  
New Republican Books - Advertising

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		21		2015

**Transaction ID : SB29.4561**

Amount of Each Disbursement this Period

696.42
--------

Full Name (Last, First, Middle Initial)

**C. Jones Day**

Mailing Address 51 Louisiana Ave NW

City  
WashingtonState  
DCZip Code  
20001-2113Purpose of Disbursement  
Legal Expenses

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4549**

Amount of Each Disbursement this Period

450.00
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2579.54



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEW REPUBLICAN.ORG**

Full Name (Last, First, Middle Initial)

**A. New Republican, LLC**

Mailing Address 815 Slaters Lane

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Consulting Services - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4550**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**B. New Republican, LLC**

Mailing Address 815 Slaters Lane

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Consulting - Fundraising

003

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4551**

Amount of Each Disbursement this Period

10000.00
----------

Full Name (Last, First, Middle Initial)

**C. New Republican, LLC**

Mailing Address 815 Slaters Lane

City	State	Zip Code
Alexandria	VA	22314

Purpose of Disbursement  
Postage Expense

001

Candidate Name

Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.4552**

Amount of Each Disbursement this Period

32.14
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

20032.14
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	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

NAME OF COMMITTEE (In Full)  
NEW REPUBLICAN.ORG

Category/  
Type

10000.00

Category/  
Type

2676.41

Three digital displays showing the date 05/20/2015 in MM/DD/YYYY format. The first display shows '05', the second shows '20', and the third shows '2015'. Each display has a small 'M' or 'D' or 'Y' indicator above the digits.

Amount of Each Disbursement this Period

Category/  
Type

28443.07

41119.48

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 11 OF 18

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**NEW REPUBLICAN.ORG**

Full Name (Last, First, Middle Initial)

**A. The Artists & Athletes Alliance, Inc**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

Mailing Address 900 19th Street NW  
Suite 800

City Washington State DC Zip Code 20006

Purpose of Disbursement  
Consulting - Industry Outreach

003

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.4545**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Verizon**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

Mailing Address PO Box 660720

City Dallas State TX Zip Code 75266-0720

Purpose of Disbursement  
Phone Lines - Monthly

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.4547**

Amount of Each Disbursement this Period

216.96

Full Name (Last, First, Middle Initial)

**C. Verizon**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

Mailing Address PO Box 660720

City Dallas State TX Zip Code 75266-0720

Purpose of Disbursement  
Phone Lines - Monthly

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB29.4548**

Amount of Each Disbursement this Period

221.96

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5438.92

76194.78

**SCHEDULE C (FEC Form 3X)****LOANS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

PAGE 12 OF 18

FOR LINE 13 OF FORM 3X

NAME OF COMMITTEE (In Full)

Transaction ID : SC/10.4494

NEW REPUBLICAN.ORG

**LOAN SOURCE** Full Name (Last, First, Middle Initial)

Alejandro Castellanos

Election:

☐ Primary☐ General☐ Other (specify) ▼

Mailing Address 399 North Quaker Lane

City Alexandria

State VA

ZIP Code 22304

Original Amount of Loan

20000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

20000.00

**TERMS**

Date Incurred

MM / DD / YY  
02 / 03 / 2015

Date Due

MM / DD / YY  
12/31/2015

Interest Rate

0.00 % (apr)

Secured:

☐ Yes☒ No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

2. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

3. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:

4. Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount  
Guaranteed  
Outstanding:**SUBTOTALS** This Period This Page (optional)..... ►

20000.00

**TOTALS** This Period (last page in this line only)..... ►

20000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 13 OF 18

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bluebonnet Fundraising

Nature of Debt (Purpose):  
Consulting - Fundraising

Mailing Address 3300 Bee Caves Road # 650-1151

City State  
Austin TXZip Code  
TX 78746

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.4534

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bluebonnet Fundraising

Nature of Debt (Purpose):  
Consulting - Fundraising April 2015

Mailing Address 3300 Bee Caves Road # 650-1151

City State  
Austin TXZip Code  
TX 78746

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.4536

Amount Incurred This Period

0.00

Payment This Period

2500.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bluebonnet Fundraising

Nature of Debt (Purpose):  
Advertising Expenses

Mailing Address 3300 Bee Caves Road # 650-1151

City State Zip Code  
Austin TX 78746

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4537

Amount Incurred This Period

2024.70

Payment This Period

2024.70

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 14 OF 18

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Bluebonnet Fundraising

Nature of Debt (Purpose):  
Consulting - Fundraising

Mailing Address 3300 Bee Caves Road # 650-1151

City State  
Austin TXZip Code  
TX 78746

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4564

Amount Incurred This Period

2500.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global Printing

Nature of Debt (Purpose):  
New Republican Books Edition IV Qty 200

Mailing Address 3670 Wheeler Ave

City State  
Alexandria VAZip Code  
VA 22304

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4558

Amount Incurred This Period

1433.12

Payment This Period

1433.12

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Global Printing

Nature of Debt (Purpose):  
New Republican Books Edition IV Qty 100

Mailing Address 3670 Wheeler Ave

City State Zip Code  
Alexandria VA 22304

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4559

Amount Incurred This Period

696.42

Payment This Period

696.42

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

2500.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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PAGE 15 OF 18

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Jones Day

Nature of Debt (Purpose):  
Legal Expenses

Mailing Address 51 Lousisiana Ave NW

City State

Zip Code

Washington

DC

20001-2113

Outstanding Balance Beginning This Period

450.00

Transaction ID : SD10.4524

Amount Incurred This Period

0.00

Payment This Period

450.00

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):

Consulting Services - Fundraising

Mailing Address 815 Slaters Lane

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD10.4505

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):

Consulting - Fundraising

Mailing Address 815 Slaters Lane

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

10000.00

Transaction ID : SD10.4525

Amount Incurred This Period

0.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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PAGE 16 OF 18

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):  
Shipping Expenses

Mailing Address 815 Slaters Lane

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

32.14

Transaction ID : SD10.4526

Amount Incurred This Period

0.00

Payment This Period

32.14

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):  
Consulting - Fundraising

Mailing Address 815 Slaters Lane

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4533

Amount Incurred This Period

10000.00

Payment This Period

10000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):  
Travel Expenses - CA

Mailing Address 815 Slaters Lane

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4540

Amount Incurred This Period

2676.41

Payment This Period

2676.41

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
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PAGE 17 OF 18

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

New Republican, LLC

Nature of Debt (Purpose):  
Administrative Consulting

Mailing Address 815 Slaters Lane

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4541

Amount Incurred This Period

28443.07

Payment This Period

28443.07

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Artists &amp; Athletes Alliance, Inc

Nature of Debt (Purpose):

Consulting - Industry Outreach

Mailing Address 900 19th Street NW

Suite 800

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4538

Amount Incurred This Period

5000.00

Payment This Period

5000.00

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon

Nature of Debt (Purpose):

Phone Lines - Monthly

Mailing Address PO Box 660720

City

State

Zip Code

Dallas

TX

75266-0720

Outstanding Balance Beginning This Period

216.96

Transaction ID : SD10.4527

Amount Incurred This Period

0.00

Payment This Period

216.96

Outstanding Balance at Close of This Period

0.00

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
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numbered line)

PAGE 18 OF 18

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☒ 10

NAME OF COMMITTEE (In Full)

NEW REPUBLICAN.ORG

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon

Nature of Debt (Purpose):  
Phone Service

Mailing Address PO Box 660720

City State

Zip Code

Dallas

TX

75266-0720

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.4532

Amount Incurred This Period

221.96

Payment This Period

221.96

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ►

0.00

2) TOTALS This Period (last page this line number only)..... ►

2500.00

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ..... ►

20000.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

22500.00